

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 28, 2009  
Secretary of State**

DOCUMENT# N05963

Entity Name: FONTANAR TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1709 WEST 58 STREET  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

1709 WEST 58 STREET  
HIALEAH, FL 33012

**New Mailing Address:**

FEI Number: 59-2659545      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VALDIVIA, ILEANA  
1709 WEST 58 STREET  
HIALEAH, FL 33012      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: VALDIVIA, ILEANA  
Address: 1709 WEST 58 STREET  
City-St-Zip: HIALEAH, FL 33012

Title: V      ( ) Delete  
Name: JEREZ, ELVIN  
Address: 5866 W 16 LANE  
City-St-Zip: HIALEAH, FL 33012

Title: ST      ( ) Delete  
Name: TELLERIA, JEANNETTE  
Address: 1693 W. 58TH STREET  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VALDIVIA ILEANA

P

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date